STANFORD HOSPITAL AND CLINICS OR Region

EOC Ongoing Compliance Audit ANESTHESIA WORKROOM

Date

Revised 3.06

ye	no			
		1	All employees are wearing name tags with first and last name and title. The name on the badge can be seen.	
			(Check this on any staff members you encounter while doing this checklist)	
		2	No OR schedules or any other patient information can be seen by patients or visitors.	
**	Ask	a RN	or clerk how they would verify that a particular physician is credentialed to do a particular procedure.	
			ey would ask their manager, the Nursing Supervisor, or would check in MSONet)	
			A patient has a reaction to a medication. Who do you report it to?	
(A	nswe	er: to	the MD, to the Pharmacy using the PSN system, or by calling the Drug Information Center at 3-6422)	
H	ALL	WA		
		3	Equipment, stock, or carts are not blocking the hallways, fire extinguishers, fire alarm boxes, or exits.	
			(If in the halls, they must be on the same side of the hall.)	
		4	Doors in the OR remain closed.	
		5	Fire extinguishers are inspected annually. (Check the tag on the extinguisher)	
		6	Exits are clear and free of obstruction. Nothing is stored within 6 feet of any exit.	
M	EDI	CAL	GAS SHUTOFF VALVES	
		7	Staff knows where the emergency medical gas shutoff valves are.	
			(Ask a couple staff members if they know where the shut-off valves are)	
CI	RAS	H C	ART AND HYPERTHERMIA CARTS	
_		8	Carts are readily available, uncluttered, and locked.	
		9	a. Crash cart and the defibrillator are checked daily. (check the log for entries)	
			b. Malignant hyperthermia carts are checked daily and are locked. (check log for entries)	
G	ENE	RAI	ENVIRONMENT	
		10	Emergency numbers are on telephones in all areas.	
		11	All linen carts are covered	
		12	Only cleaning supplies are stored in cabinets under sinks. There are no paper towels under the sink.	
		13	Countertops are clear and clean. Sinks are clean.	
		14	All signs are laminated	
		15	If IV bags have been spiked and hung prior to being used the staff knows that they are only good for 24 hours.	
	Γ	16	Syringes and needles are properly disposed of. Sharps containers have lids on them and are no more than 3/4 full	
			(Check the sharps containers in the area where you are doing this checklist)	
		17	Electrical and other equipment has been inspected within the past year and inspection labels with dates are visible	
			(Check a few electrical items such as an infusion pump, a suction machine or ventilator)	
W	ORE	KRO	OM AREA	
		18	The desk is tidy, with no food at the nursing station, including coffee.	
		19	No meds are on top of Pyxis or in unlocked places. Cabinets containing meds are locked.	
		20		
		21	There is a daily log of the temperatures of med refrigerators. Med refrig. Temp36-46 degrees F.	
		22	All meds are within expiration dates. (Do random checks of several of the unit's stock medications)	
		23	Any multi-dose vial discarded after each procedure.	
M	EDIC	CAT	ION PASS OBSERVATION	
		24	a.	
STORAGE and SUPPLY ROOMS				
		25	Supplies are not stored directly on the floor	
		26	Items on shelves are at least 18 inches from the ceiling in storage rooms.	

	27 All supplies are within expiration dates:			
	(Do a random check of the supplies-you don't need to check them all)			
	a. Blood culture bottles			
	b. Culture tubes			
	c. Betadine, blood collection tubes, wrapped tongue blades, KY Jelly, etc. (almost everything now has an expi			
	date—check several items)			
	All cleaning and disinfection products in containers labeled. The products are hospital approved.			
	(There are no cleaning products, soaps or lotions brought in from home.)			
	Soiled linen is in blue bags. Linen bags are no more than 3/4 filled.			
	Filled linen and trash bags labeled (only in the OR label w/ suite # and time)			
	(The bags are not overfilled or ripped.)			
	a. All biohazard containers lined with a red bag and labeled with a biohazard sign.			
	b. All biohazard containers have covers on them.			
	(Regular trashcans and trashcans for glass do not need covers.)			
	Biohazard signs stating "no food" posted on all refrigerators containing biohazardous material.			
	O2 cylinders are restrained or are in a cart/carrier.			
	There are no more than 12 O ₂ cylinders in any one room.			
	Equipment stored in rooms with electrical panels is at least 3 feet away from the control panels.			
OR RO	OR ROOMS WITH LASERS IN USE			
	36			
	37			
WARM	ERS			
	88			
	39 a.			
	b.			
- - .	a. Warmers with IV solutions are no warmer than 104 degrees F.			
	b. Not stored in warmers longer than 14 days			
	(IV solutions removed from their over wraps must be used or discarded within 24 hours)			
WORK	ROOM AND OPERATING ROOM			
	1			
	There is no dust on the anesthesia equipment or other equipment in the room.			
	(Yes, the surveyors actually look for this sort of thing!)			
1 4				
	4 Staff know where the eye wash stations are located			
ALARM	<u> </u>			
	5 When patient care alarms go off can you hear them?			
	(staff must be aware that alarms are NEVER turned off)			
1	6 Does the staff respond to the alarms promptly?			
	(staff must be aware that a response is necessary on all alarms)			